

Name:



MARCH: TIME DOCUMENTATION FORM

•	uiiio	Please F	rint		_
Lo	cation: _	Gr	ade(s):# Kids	
W	eek 1 (A	March 1-5): spent	h	nours teaching nutrition.	
W	eek 2 (A	March 8-12): I spent		hours teaching nutrition.	
	-	- •		hours teaching nutrition.	
	_			hours teaching nutrition.	
VV	еек 5 (л	narch 29-Apr 2): 1 speni	i	hours teaching nutrition.	
Ple	ease Indicate			rks) you taught the following nutrition/physica can be taught more than once a day)	ıl
4	Topic	mis monin (can be any length of	#	Topic	7
_		Low Fat Milk or Equivalent (and		MyPyramid – Healthy Eating Plan	
	Alternative	Calcium Sources)			╛
	Fats and Oi	ils		Physical Activity	
	Fiber Rich	Foods		Promote Healthy Weight	
	,	ping / Preparation		Sodium & Potassium	_
	Fruits & Vegetables			Whole Grains	
	Lean Meat			Hand washing/food safety	_
		ed Sugars or Caloric Sweeteners			
М) 20 3n	Pyramid are unted as My d Whole Gro	taught together (fruits & veggie Pyramid not as individual topics.	s, whole For ex sion the twould	counted separately. However, if any two top le grains, milk, meats & beans), they should be cample, if Fruits & Veggies are taught in one se en these would be counted separately. If they d be counted as MyPyramid.	e ession
).		
		Shortest:	*		
		Longest:			
Employee Signature				Date	
Kid Zone Supervisor Signature				Date	
				-We accell age	

www.eatwellbewell.org

Forms should be turned in at the end of each month to your designated staff member or the Kid Zone mailbox at your school. For questions or concerns contact: Kim Williams at (480) 350-5447, kim williams@tempe.gov or Brandon Hernandez at (480) 350-5409, Brandon Hernandez@tempe.gov. Thank you for your participation.